FORM D

SEC Mail Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

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Washington, DC

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NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: April 30,2008
Estimated average burden
hours per response.....16.00



(check if this is an amendment and name has changed, and indicate change.) Name of Offering Series A Preferred Stock of Zumbox, Inc. Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Filing Under (Check box(es) that apply): Type of Filing: A. BASIC IDENTIFICATION DATA Enter the information requested about the issuer (check if this is an amendment and name has changed, and indicate change.) Name of Issuer Zumbox, Inc. Telephone Number (Including Area Code) (Number and Street, City, State, Zip Code) Address of Executive Offices (818) 707-9261 Westlake Village, CA 91362 31364 Via Colinas, Suite 103 Telephone Number (Including Area Code) Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Brief Description of Business eCommerce website BEST AVAILABLE COPY Type of Business Organization limited partnership, already formed other (please : corporation limited partnership, to be formed business trust Actual | Estimated Actual or Estimated Date of Incorporation or Organization: [1]0 [0]6Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction) DE

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 774(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

State:
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted UI,OE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION -

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

		A. BASIC ID	ENTIFICATI	ON DATA			
2. Enter the information reques	ited for the fol-	lowing:					
• Each promoter of the is	suer, if the iss	uer has been organized w	ithin the past	five years;			
Each beneficial owner to	aving the pow	er to vote or dispose, or di	rect the vote of	disposition o	f, 10% or more a	f a clas	is of equity securities of the issue
Each executive officer	and director of	corporate issuers and of	corporate gen	cral and mana	aging partners of	partne	ership issuers; and
Each general and mana	ging partner of	f partnership issuers.					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Fxecut	ive Officer	Director		General and/or
Check Box(cs) that Approx.	Tromoter	A Delicitoria Owner					Managing Partner
Full Name (Last name first, if ind Friedman, Maury	lividual)						
Business or Residence Address 31364 Via Colinas, Suite 103	,	Street, City, State, Zip Co Ilake Village, CA 9136					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Z Execut	ive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if inc Nober, Stephen	lividual)						
		Street, City, State, Zip Co					
31364 Via Colinas, Suite 103		tlake Village, CA 9136		. 0.55			C
Check Box(es) that Apply:	Promoter	Beneficial Owner	[Z] Execu	ive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if inc Goren, Yarone	lividual)						
Business or Residence Address	(Number and	Street, City, State, Zip C	ode)			-	
31364 Via Colinas, Suite 103	Wes	tlake Village, CA 9130	32				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execu	ive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if inc	lividual)						
Zweig, Bertram							
Business or Residence Address 1999 Avenue of the Stars, S	•	Street, City, State, Zip C Los Angeles, CA, 9					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execu	tive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if inc Bilger, Arthur	dividual)						
Business or Residence Address 10880 Wilshire Blvd., Suite 1		Street, City, State, Zip C Los Angeles, CA 9					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execu	ive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if ine Packard, Ron	dividual)	····		-			
Business or Residence Address 3833 Serra Road	(Number and	Street, City, State, Zip C Mallbu, CA 90265	ode)				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Execu	tive Officer	Director		General and/or Managing Partner
Full Name (Last name first, if in	dividual)						
Business or Residence Address	(Number and	Street, City, State, Zip C	ode)				
	(Usc bla	nk sheet, or copy and use	additional co	pies of this st	neet, as necessary	y)	

Г				<u>.</u>	B. 11	NFORMATI	ON ABOU	r offeri	NG				
<u> </u>						•						Yes	No
1.	Has the	issuer sold	i, or does th										赵
	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?												
2.	What is	the minim	um investm	ent that w	ill be acce	pted from a	ny individ	ual?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			\$ Yes	No
3.	Does the	c offering	permit joint	l ownershi	p of a sing	le unit?				•••••		I CS	νο []
4.	Enter th	e informat	ion request	ed for eac	h person w	ho has bee	n or will b	e paid or g	iven, dire	ctly or indi	irectly, any		
	If a pers	on to be lis	ilar remune ted is an ass	ociated pe	rson or ago	nt of a brok	er or deale	r register e d	with the S	EC and/or	with a state		
	or states	, list the na	me of the b	roker or de	aler. If mo	re than five	(5) persor	is to be list	ed are asso	ciated pers	ons of such		
E.,1			first, if indi		- INTOTTILATE	on for that	Olokei Oi (zearer only					
N/	•	Last Hame	11124 11 11101	· vidualy									
Bu	siness or	Residence	Address (N	lumber and	Street, Ci	ty, State, Z	ip Code)		·			<u> </u>	
Nai	me of Ass	ociated Br	oker or De	aler					_				
													······································
Sta			Listed Has							•		L., Y1	l Cinter
	(Check	"All States	" or check	individual	States)	••••	••••••••			**************		⊔ A!	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	(ID)
	IL	[N]	IA	KS	(KY)	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	[NH]	(N)	NM	NY]	NC)	ND WA	OH WV	OK WI	OR WY	PA PR
	RL	SC.	SD	[N]	TX	[UT]	VT	VA	WA	<u>[w v</u>]	M.T.	<u>w</u> 1	[FA]
Ful	l Name (Last name	first, if ind	ividual)		-							
Bu	siness or	Residence	Address ()	Number an	d Street, C	ity, State, 2	Zip Code)		-				· · · · · · · · ·
Na	me of As	sociated B	roker or De	aler						• 120			
510	tor in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
314			s" or check						***********			□ ∧ι	l States
		_							_			_ 	(IV)
	AL	[AK]	[AZ]	[AR]	CA KY	CO LA	CT ME	MD	(DC)	(FL)	[GA] [MN]	MS	MO
	IL MT	NE NE	IA NV	NH [KS]	NJ	NM	NY	NC	ND	OH)	ŌK)	OR	PA
	RI	SC)	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Fu	II Name (Last name	first, if ind	ividual)			-			 · · 			
	einere or	Peridence	: Address ()	Number an	d Street C	ity State	Zin Code)						
υu	3111C33 VI	*************	1001033 (1										
Na	me of As	sociated B	roker or De	aler							-		
Sta	tes in Wi	nich Person	Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individua	l States)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			************		□ A1	1 States
	AL	ĀŔ	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ĪĎ
	<u>ir</u>	[או]	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	[N]	MM	NY	NC	ND	OH)	OK.	OR WV	PA DO
	RI	(SC)	SD]	[אז]	TX	(UT)	∇T	VA	WA	$\overline{\mathbf{w}}\mathbf{v}$	[WI]	WY	PR

c. offering price, number of investors, expenses and use of proceeds $% \left(\mathbf{r}\right) =\left(\mathbf{r}\right)$

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.			
	Type of Security	Aggregate Offering Pric	c	Amount Already Sold
	Debt		_	s
	Equity	3,000,000.	00	\$ 2,500,000.00
	Common Preferred			
	Convertible Securities (including warrants)	s	_	s
	Partnership Interests	s	_	s
	Other (Specify)	<u> </u>		<u>\$</u>
	Total	3,000,000.	00	\$ 2,500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.			
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	8	_	\$ 2,500,000.00
	Non-accredited Investors		_	S
	Total (for filings under Rule 504 only)			\$
	Answer also in Appendix, Column 4, if filing under ULOE.			
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.			
		Type of		Dollar Amount
	Type of Offering	Security		Sold
	Rule 505			5
	Regulation A		_	2
	Rule 504			5
	Total			\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
	Transfer Agent's Fees			s
	Printing and Engraving Costs	******		\$
	Legal Fees		Z	s 75,000.00
	Accounting Fees	,		\$
	Engineering Fees			s
	Sales Commissions (specify finders' fees separately)	**********		s
	Other Expenses (identify)			\$
	Total			\$_75,000.00

	C. OFFERING PRICE, N	UMBER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS	
	and total expenses furnished in response to Part C	ffering price given in response to Part C — Question I — Question 4.a. This difference is the "adjusted gross	S	\$
5.	each of the purposes shown. If the amount for	proceed to the issuer used or proposed to be used for rany purpose is not known, furnish an estimate and all of the payments listed must equal the adjusted gross Part C — Question 4.b above.		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees		□\$	s
			_	_
	Purchase, rental or leasing and installation of	machinery		
	and equipment			
	Construction or leasing of plant buildings and	facilities	□ \$	- 🗆 \$
	Acquisition of other businesses (including the offering that may be used in exchange for the issuer pursuant to a merger)	value of securities involved in this assets or securities of another	□ \$	
	Working capital			Z \$ 2,275,000.00
	Other (specify):			
				_
	Column Totals		□\$ 0.00	\$_2,925,000.00
		***************************************	_	,925,000.00
		D. FEDERAL SIGNATURE		
sie	nature constitutes an undertaking by the issuer to	the undersigned duly authorized person. If this notice furnish to the U.S. Securities and Exchange Comminacredited investor pursuant to paragraph (b)(2) of	ssion, upon writte	ule 505, the following en request of its staff,
Iss	uer (Print or Type)	Signature	Date	
Zu	imbox, Inc.	Most River	3-11-08	<u> </u>
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)		
da	ury Friedman	Chief Executive Officer		

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	e. State signature		
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No ⊠

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
Zumbox, Inc.	Mony Rydman	3-11-08
Name (Print or Type)	Title (Print or Type)	
Maury Friedman	Chief Executive Officer	

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX											
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)						
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
ΛL											
AK											
ΑZ					_						
AR											
CA		×	Series A Preferred Stock \$2,125,000.00	6	<u> </u>						
со											
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1	Intend to non-a investor	2 I to sell accredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		Disqualification under State ULOI (if yes, attach explanation of waiver granted) (Part E-Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
МО										
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NE					_					
NV										
NH							_			
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				APP	ENDIX				
1	to non-a	d to sell accredited rs in State	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)				5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
PR									

END